

Practitioner's Docket No. 0037.00



PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of: Clark, Andrew

Application No.: 09/414,384

Group No.: 3761

Filed: 10/07/1999

Examiner: A. Lewis

For: FLOW RESISTANCE MODULATED AEROSOLIZED ACTIVE AGENT DELIVERY

Assistant Commissioner for Patents

Washington, D.C. 20231

REQUEST FOR CORRECTED FILING RECEIPT

1. Attached is a copy of the official filing receipt received from the PTO in the above application for which issuance of a corrected filing receipt is respectfully requested.

2. There is an error with respect to the following, which is omitted.

1. This application claims priority to U.S. Provisional Patent Application Serial No. 60/103,702 which was filed on October 9, 1998

2. The above correction is due to applicant's error and the fee therefore, under 37 C.F.R. section 1.19(h), of \$25.00 is paid as follows:

Charge Account No. 500348 \$ 25.00.

Date: 9-20-01

Signature of Practitioner

Reg. No.: 45,302

Tel. No.: 650-631-3100

Customer No.: 21968

Guy v. Tucker

Inhale Therapeutic Systems, Inc.

150 Industrial Road

San Carlos, CA 94070

CERTIFICATE OF MAILING/TRANSMISSION (37 C.F.R. section 1.8a)

I hereby certify that this correspondence is, on the date shown below, being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to the Assistant Commissioner for Patents, Washington, D.C. 20231.

Signature

9/20/01
Date

FILING RECEIPT

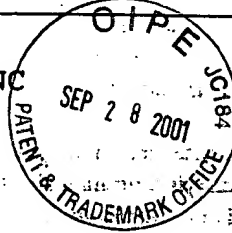


UNITED STATES DEPARTMENT OF COMMERCE
Patent and Trademark Office
ASSISTANT SECRETARY AND COMMISSIONER
OF PATENTS AND TRADEMARKS
Washington, D.C. 20231

APPLICATION NUMBER	FILING DATE	GRP ART UNIT	FIL FEE REC'D	ATTORNEY DOCKET NO.	DRWGS	TOT CL	IND CL
09/414,384	10/07/99	1615	\$890.00	0037.00	7	20	2

021968

INHALE THERAPEUTIC SYSTEMS INC
150 INDUSTRIAL ROAD
SAN CARLOS CA 94025



Receipt is acknowledged of this nonprovisional Patent Application. It will be considered in its order and you will be notified as to the results of the examination. Be sure to provide the U.S. APPLICATION NUMBER, FILING DATE, NAME OF APPLICANT, and TITLE OF INVENTION when inquiring about this application. Fees transmitted by check or draft are subject to collection. Please verify the accuracy of the data presented on this receipt. If an error is noted on this Filing Receipt, please write to the Office of Initial Patent Examination's Customer Service Center. Please provide a copy of this Filing Receipt with the changes noted thereon. If you received a "Notice to File Missing Parts of Application" ("Missing Parts Notice") in this application, please submit any corrections to this Filing Receipt with your reply to the "Missing Parts Notice." When the PTO processes the reply to the "Missing Parts Notice," the PTO will generate another Filing Receipt incorporating the requested corrections (if appropriate).

Applicant(s) ANDREW CLARK, HALF MOON BAY, CA; CARLOS SCHULER, CUPERTINO, CA; STEVE PABOOJIAN, MENLO PARK, CA.

IF REQUIRED, FOREIGN FILING LICENSE GRANTED 11/01/99
TITLE FLOW RESISTANCE MODULATED AEROSOLIZED ACTIVE AGENT DELIVERY

PRELIMINARY CLASS: 424

This application claims priority to
US Provisional Patent Application Serial No
60/103,702 which was filed on October 9, 1998

DATA ENTRY BY: COUPLIN, JACKIE TEAM: 01 DATE: 12/15/99

(See reverse for new important information)

FEE TRANSMITTAL

for FY 2000

Patent fees are subject to annual revision.
Small Entity payments must be supported by a small entity statement,
otherwise large entity fees must be paid. See Forms PTO/SB/09-12.
See 37 C.F.R. §§ 1.27 and 1.28.

TOTAL AMOUNT OF PAYMENT (\$)

Complete if Known

Application Number 09/414,384
Filing Date October 7, 1999
First Named Inventor Andrew Clark
Examiner Name A. Lewis
Group / Art Unit 3761
Attorney Docket No. 0037.00

METHOD OF PAYMENT (check one)

1. ☒ The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to:

Deposit Account Number 500348

Deposit Account Name Inhale Therapeutic Systems

- ☒ Charge Any Additional Fee Required
Under 37 CFR §§ 1.16 and 1.17

2. ☐ Payment Enclosed:

☐ Check ☐ Money Order ☐ Other

FEE CALCULATION

1. BASIC FILING FEE

Large Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee Description	Fee Paid
101 690	201 345	Utility filing fee	
106 310	206 155	Design filing fee	
107 480	207 240	Plant filing fee	
108 690	208 345	Reissue filing fee	
114 150	214 75	Provisional filing fee	

SUBTOTAL (1) (\$ 0.00)

2. EXTRA CLAIM FEES

Total Claims 15 - 20** = 5 X 18 = 90
Independent Claims 3 - 3** = 0 X 80 = 0
Multiple Dependent = 0

**or number previously paid, if greater; For Reissues, see below

Large Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee Description
103 18	203 9	Claims in excess of 20
102 78	202 39	Independent claims in excess of 3
104 260	204 130	Multiple dependent claim, if not paid
109 78	209 39	** Reissue independent claims over original patent
110 18	210 9	** Reissue claims in excess of 20 and over original patent

SUBTOTAL (2) (\$)

FEE CALCULATION (continued)

3. ADDITIONAL FEES

Large Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee Description	Fee Paid
105 130	205 65	Surcharge - late filing fee or oath	0.00
127 50	227 25	Surcharge - late provisional filing fee or cover sheet.	0.00
139 130	139 130	Non-English specification	0.00
147 2,520	147 2,520	For filing a request for reexamination	0.00
112 920*	112 920*	Requesting publication of SIR prior to Examiner action	0.00
113 1,840*	113 1,840*	Requesting publication of SIR after Examiner action	0.00
115 110	215 55	Extension for reply within first month	0.00
116 380	216 190	Extension for reply within second month	0.00
117 870	217 435	Extension for reply within third month	0.00
118 1,360	218 680	Extension for reply within fourth month	0.00
128 1,850	228 925	Extension for reply within fifth month	0.00
119 300	219 150	Notice of Appeal	0.00
120 300	220 150	Filing a brief in support of an appeal	0.00
121 260	221 130	Request for oral hearing	0.00
138 1,510	138 1,510	Petition to institute a public use proceeding	0.00
140 110	240 55	Petition to revive - unavoidable	0.00
141 1,210	241 605	Petition to revive - unintentional	0.00
142 1,210	242 605	Utility issue fee (or reissue)	0.00
143 430	243 215	Design issue fee	0.00
144 580	244 290	Plant issue fee	0.00
122 130	122 130	Petitions to the Commissioner	0.00
123 50	123 50	Petitions related to provisional applications	0.00
126 240	126 240	Submission of Information Disclosure Stmt	180.00
581 40	581 40	Recording each patent assignment per property (times number of properties)	0.00
146 690	246 345	Filing a submission after final rejection (37 CFR § 1.129(a))	0.00
149 690	249 345	For each additional invention to be examined (37 CFR § 1.129(b))	0.00
Other fee (specify) Request for Corrected filing receipt			25.00
Other fee (specify)			0.00

* Reduced by Basic Filing Fee Paid

SUBTOTAL (3) (\$ 205.00)

SUBMITTED BY

Name (Print/Type) Guy V. Tucker

Registration No. 45,302
(Attorney/Agent)

Complete (if applicable)

Telephone 650--631-3100

Signature

Guy V. Tucker

Date

9-20-01

WARNING:

Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

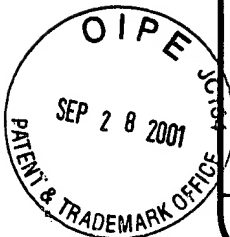
Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

Receipt #

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PTO/SB/21 (6-98)
Approved for use through 09/30/2000. OMB 0651-0031
Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	09/414,384
	Filing Date	October 7, 1999
	First Named Inventor	Andrew Clark
	Group Art Unit	3761
	Examiner Name	A. Lewis
Total Number of Pages in This Submission		Attorney Docket Number 0037.00

ENCLOSURES (check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Assignment Papers (for an Application)	<input type="checkbox"/> After Allowance Communication to Group
<input checked="" type="checkbox"/> Fee Attached	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input checked="" type="checkbox"/> Amendment / Response	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition Routing Slip (PTO/SB/69) and Accompanying Petition	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address	<input checked="" type="checkbox"/> Additional Enclosure(s) (please identify below):
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Terminal Disclaimer	Cited References, postcard
<input checked="" type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Small Entity Statement	
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> Request for Refund	
<input type="checkbox"/> Response to Missing Parts/Incomplete Application	Remarks	
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	Guy V. Tucker; Inhale Therapeutic Systems, Inc.
Signature	<i>Guy V. Tucker</i>
Date	9-20-01

CERTIFICATE OF MAILING			
I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Assistant Commissioner for Patents, Washington, D.C. 20231 on this date: 09/20/2001			
Typed or printed name	Kathy Honnert		
Signature	<i>Kathy Honnert</i>	Date	9/20/01

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**Assistant Commissioner for Patents
Washington, D.C. 20231**

on September 20, 2001

Date

Signature

Kathy Honnert

Typed or printed name of person of signing Certificate

Note: Each paper must have its own certificate of mailing, or this certificate must identify each submitted paper.

The following papers listed below are submitted:

Amendment Transmittal

Request for corrected filing receipt

Fee Transmittal

Amendment

IDS

Form 1449

References

Previous IDS/1449 copies